## PART B - FEE(S) TRANSMITTAL

## Complete and send this form, together with applicable fee(s), to: Mail Stop ISSUE FEE Commissioner for Patents

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| N/A Filed via EFS -WEB | (Depositor's name) |
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|                        |                    |

APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY POCKET NO. CONTRIMATION NO. 10087 027 2/28/2002 Adam W. Smith MS1 - 0861USC1 6939
TITLE OF INVENTION:

| Charge E. Anya   2194     Change of correspondence address or indication of "Fee Address" (37   2194   2. For printing on the patent front page, list (10 the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (lawing as a member a registered address from PTO/SD1/22) attached.   2. For printing on the patent front page, list (10 the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (lawing as a member a registered attorney or agents on the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (lawing as a member a registered attorney or agent) and the names of up to 3 registered patent attorneys or agent and the names of up to 3 registered patent attorneys or agent of up to 3 registered patent attorneys or agent on the names of up to 3 registered patent attorneys or agent and the names of up to 3 registered patent attorneys or agent and the names of up to 3 registered patent attorneys or agent and the names of up to 3 registered patent attorneys or agent and the names of up to 3 registered patent attorneys or agent and the names of up to 3 registered patent attorneys or agent and the names of up to 3 registered patent attorneys or agent and the names of up to 3 registered patent attorneys or agent and the names of up to 3 registered patent attorneys or agent attorneys or agent attorneys or agent attorneys or agent attorneys and patent attorneys or agent attorneys are agreed attorney or agent attorneys are agreed attorney or agent attorneys are attorneys or agent or the assignee or or bor no overproyment, to Depoin Account Number or agent or the assignee or or bor or other or an account of the names of up to a registered patent attorneys or agent or the name or other or an account of the names of up to a registered patent attorneys are or or the name of the names    | 10/087,027  | 2/28/2002   |   | Adam W. Smith  | MS1   | - 0861USC1                          | 6939                |
|--|---|---|---|--|---|-------------------------------------|---------------------|
| EXAMINER   | TITLE OF INVENTION  |   | Interface for Network S                                     | Software Platform  |   |                                     |                     |
| EXAMINER   ART UNIT   CLASS-SUBCLASS   |   |   |   |  |   |                                     |                     |
| EXAMINER  ART INIT  CLASS-SUBCLASS  Charles E. Anya  2194  Change of correspondence address or indication of "Fee Address" 27  Fix 1.5(a),  Change of correspondence address (or Change of Correspondence Address from PIOSBH22) anached.  The Address from PIOSBH22 anached.  The Address from PIOSBH22 anached.  The Address from PIOSBH22 anached.  The Address from Subclass and the names of up to 3 registered patient attorneys or agent and the names of up to 3 registered patient attorneys or agent and the names of up to 3 registered patient attorneys or agent and the names of up to 3 registered patient attorneys or agent and the names of up to 2 registered patient attorneys or agent. If no name is 1 levels to 3 registered patient attorneys or agent. If no name is 1 levels to 3 registered patient attorneys or agent. If no name is 1 levels to 3 registered patient attorneys or agent. If no name is 2 registered patient attorneys or agent. If no name is 1 levels to 3 registered patient attorneys or agent. If no name is 1 levels to name will be printed.  (A) NAME OF ASSIGNEE  Microsoft Corporation  (A) NAME OF ASSIGNEE  Microsoft Corporation assignee category or categories (will not be printed on the patient).  (B) RESIDENCE: CITY and STATE OR COUNTRY)  Redmond WA  Payment of Fee(s): (Please first trapply any previously paid issue fee shown above)    A check is enclosed.   Payment by redit card.   | APPLN. TYPE   | SMALL ENTITY  | ISSUE FEE DUE   | PUBLICATION FEE DUE  | PREV. PAID ISSUE FEE  | TOTAL FEE(S) DUE                    | DATE DUE            |
| Charles E. Anya 2194  Change of correspondence address or indication of "Fee Address" (37 Feb 1.630.)  Change of correspondence address or indication of "Fee Address" (37 Feb 1.630.)  Change of correspondence address (or Change of Correspondence Address from PLOSB12.2) auxeload (27 Feb 2.200.)  The Address of mp 1.50 Feb 2.200.  The Applicant of Limits Mall. ENTITY status. See 37 CFB 1.27.  The Applicant is no longer claiming MALL ENTITY status. See 37 CFB 1.27.  The Applicant is no longer claiming MALL ENTITY status. See 37 CFB 1.27.  The Address of the application of the serious of the seed of the serious of the seri | nonprovisional  | NO  | 1510  | 300  |   | 1810                                | 08/16/2009          |
| Change of correspondence address or indication of "Fex Address" (37    Change of correspondence address or indication of "Fex Address" (37   Change of correspondence address from Change of Correspondence address from PLOSH273 suched.   Tex. Address from PLOSH273 suched. | EXAMINER ART UNIT   |   | ART UNIT  | CLASS-SUBCLASS   | 1   |                                     |                     |
| (f) the names of up to 3 registered patent attorneys or agents of Correspondence Address for PIOSB/12) antached.  (g) the name of up to 3 registered patent attorneys or agents OR, alternatively,  (g) the name of a single firm thaving as a member a registered attorney or agents OR, alternatively,  (g) the name of a single firm thaving as a member a registered attorney or agents of the patents of the patent of a single firm thaving as a member a registered attorney or agents of the manner of up to 2 registered attorney or agents of the manner of up to 2 registered attorney or agents of the manner of up to 2 registered attorney or agents of the manner of up to 2 registered patent attorneys or agents of the patent of 2 registered patent attorneys or agents of the patent of 2 registered patent attorneys or agents of the patent of 2 registered patent attorneys or agents of the patent of 2 registered patent attorneys or agents of the patent of 2 registered patent attorneys or agents of the patent of 2 registered patent attorneys or agents of the assignment of 2 registered patent attorneys or agents of the assignment of 2 registered  | Charles E. Anya 2194  |   | 2194  |  | •   |                                     |                     |
| a. The following fee(s) are submitted:    Insue Fee   Payment fee(s):   Please first reapply any previously paid issue fee shown above)   A check is enclosed.   A check is enclosed.   Payment fee(s):   Please first reapply any previously paid issue fee shown above)   A check is enclosed.   Payment fee(s):   A check is enclosed.   Payment fee(s):   Please first reapply any previously paid issue fee shown above)   A check is enclosed.   Payment fee(s):   Please first reapply any previously paid issue fee shown above)   A check is enclosed.   Payment fee(s):   Please first reapply any previously paid issue fee shown above)   A check is enclosed.   Payment fee(s):   Please first reapply any previously paid issue fee shown above)   A check is enclosed.   Payment fee(s):   Please first reapply any previously paid issue fee shown above)   A check is enclosed.   A check is enclosed.   Payment fee(s):   Please first reapply any previously paid issue fee shown above)   A check is enclosed.   A check is enc | FR 1.363).  Change of corresp Address form PTO/SI  "Fee Address" ind PTO/SB/47; Rev 03-6 Number is required.  ASSIGNEE NAME A  PLEASE NOTE: Uni recordation as set fort (A) NAME OF ASSIGNATION (A) | tondence address (or Chai<br>B/122) attached.<br>lication (or "Fee Address'<br>12 or more recent) attach<br>ND RESIDENCE DATA<br>less an assignee is identi<br>h in 37 CFR 3.11. Comp<br>GNEE | nge of Correspondence Indication form ed. Use of a Customer | (1) the names of up to<br>or agents OR, alternative<br>(2) the name of a single<br>registered attorney or a<br>2 registered patent atto<br>listed, no name will be<br>THE PATENT (print or type<br>data will appear on the p<br>Tra substitute for filing an<br>(B) RESIDENCE: (CITY | a registered patent attorn vely, e firm (having as a membagent) and the names of uneveys or agents. If no namprinted.  be)  atent. If an assignee is id assignment.  ' and STATE OR COUNT | er a 2                              |                     |
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| nterest as shown by the records of the United States Patent and Trademark Office.  | NOTE: The Issue Fee an  | d Publication Fee (if requ  | ired) will not be accepte                                   | d from anyone other than t   |   |                                     |                     |

Authorized Signature. Bea Koempel-Thomas S8213/

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